Page:
 1 of 3

 Invoice Number:
 INV-1144025

 Invoice Date:
 06-JUL-2017

 Invoice Copy Date:
 07-06-17

BILL TO:
Media Fortitude
30 Newport Pkwy
STE 2110
Jersey City, NJ 07310

**REMIT TO:** 

THE NEW YORK INTERCONNECT LLC

PO Box 392068

Pittsburgh, PA 15251-9068

(516) 803-5380

Invoice Numb	er Custo	omer Cu	stomer Number	Billing Cycle	Payment Terms
INV-114402		of Health	000139621	05-29-17 - 06-25-17	Net 30 days

Reg/Ret	Line	Network	Day	Date	Time	Spot Title	Length	Rate
Customer Health	: NJ Depar	tment of O	rder No. : 11199	398	Contract No. : 375787	PO Number : TIM375787 124	Salesperson Name	Craig Fabricant
Type : ED	I	E	kt. Order : 37578	7	Ext. Client : NJDOH	Estimate No.: May17 i24	Product : N/A	
124 / 2012	2 124 NATIO	NAL NEWS NE	Γ #80					
	5	124	MON	05-29-17	6:40:36 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	MON	05-29-17	6:58:06 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	MON	05-29-17	7:58:06 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	MON	05-29-17	8:58:06 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	TUE	05-30-17	6:44:18 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	TUE	05-30-17	7:44:30 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	TUE	05-30-17	8:43:48 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	WED	05-31-17	6:59:06 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	WED	05-31-17	7:59:06 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
	5	124	WED	05-31-17	9:41:49 pm NJSDOH17	04H - VOICE OF HOPE LINEAR	30	\$ 50.00
						I24 Subtotal :	10	\$ 500.00
						I24 Retail Unit Subtotal :	10	\$ 500.00
						Gross Affidavit Time Charges :	10	\$ 500.00

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 Invoice Number:
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	INVOICE SUMMARY										
Order Number	Line Number	Line Start Date	Line End Date	Buy Time	Network	Region	Ordered Qty	Aire N	ed Qty M	Ordered Rate	Gross Total
11199398	5	29-MAY-17	31-MAY-17	UD: 18:00-22:00	124	124	10	10		\$ 50.00	\$ 500.00
				Order	# 11199398	Total: :	10	10			\$ 500.00
				Total Affidavit	Time Char	ges: :	10	10			\$ 500.00
TIME PERIOD	DEFINITIO	N: D=DAYPART, U	=USER DAYPART, I	P=PROGRAM, PG=PROG	RAM GROUP	, TV=TV PR	OGRAM.				

COMMERCIAL SUMMARY TOTALS					
Spot ID	Spot Title	Reg/Ret	Networks	Total Spots	Total Cost
10211303	NJSDOH17104H - VOICE OF HOPE LINEAR	124	124	10	\$ 500.00
			Total: :	10	\$ 500.00

Page: 3 of 3 Invoice Number: INV-1144025

Invoice Number: INV-1144025
Invoice Date: 06-JUL-2017
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BILL TO:
Media Fortitude
30 Newport Pkwy
STE 2110
Jersey City, NJ 07310

Invoice Number	Customer	Customer Number	Billing Cycle	Payment Terms
INV-1144025	NJ Department of Health	000139621	05-29-17 - 06-25-17	Net 30 days

# PLEASE KEEP THIS PAGE FOR YOUR RECORDS

#### **Invoice Notes**

Gross Spot Dollars :	\$ 500.00
Agency Discount(-):	\$ 75.00
Net Advertising Total :	\$ 425.00
BALANCE DUE :	\$ 425.00

# PLEASE REMIT TO:

### THE NEW YORK INTERCONNECT LLC

PO Box 392068 Pittsburgh, PA 15251-9068

(516) 803-5380

#### Payment Terms: Net 30 days

The unit rates in this invoice reflect the negotiated unit value (which may not reflect fair value as defined by GAAP), and may have been adjusted to reflect accelerated deferred payment schedules or additional non-linear media provided.

Page:

Invoice Number: Invoice Date: REMITTANCE INV-1144025 06-JUL-2017 07-06-17

Invoice Copy Date:

BILL TO:
Media Fortitude
30 Newport Pkwy
STE 2110
Jersey City, NJ 07310

Invoice Number	Customer	Customer Number	Billing Cycle	Payment Terms
INV-1144025	NJ Department of Health	000139621	05-29-17 - 06-25-17	Net 30 days

# PLEASE RETURN THIS PAGE WITH YOUR REMITTANCE

#### **Invoice Notes**

Gross Spot Dollars :	\$ 500.00
Agency Discount(-):	\$ 75.00
Net Advertising Total :	\$ 425.00
BALANCE DUE :	\$ 425.00

# PLEASE REMIT TO:

### THE NEW YORK INTERCONNECT LLC

PO Box 392068 Pittsburgh, PA 15251-9068

(516) 803-5380

#### Payment Terms: Net 30 days

The unit rates in this invoice reflect the negotiated unit value (which may not reflect fair value as defined by GAAP), and may have been adjusted to reflect accelerated deferred payment schedules or additional non-linear media provided.